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SCORETARY OF SIMIE
FALLAHASSET FLERIDA

T. CLINE
FEB 2.8 2011
EXAMINER

COVER LETTER

TO: Registration Se Division of Cor		
SUBJECT: Webtra	ain Media Produ	ctions LLC
	Name of Limit	ed Liability Company
The enclosed Articles of	Organization and fee(s) are	submitted for filing.
Please return all correspo	ondence concerning this matt	er to the following:
Khris Colo	gate	
		Name of Person
Webtrain	Media Productio	ns LLC
		Firm/Company
P O Box 5	31903	
		Address
St. Petersbi	urg, FL 33747	
		y/State and Zip Code
webtrainmed	dia@gmail.com E-mail address: (to be used f	for future annual report notification)
For further information c	oncerning this matter, please	e call:
		year () () mana Tanan Year () () mana
Khris Colgate Name o	f Person	at (502) 435-3345 CF
		m-c or f
Enclosed is a check for	the following amount:	(1987년 - 1987년 - 1987 - 1987년 - 1987
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & \$160.00 Filing Fee Certified Copy (additional copy is enclosed) S160.00 Filing Fee Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Webtrain Media Productions LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

Principal Office Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

Webtrain Media Productions LLC	Webtrain Media Productions LL	.c
10831 Canal Street	P O Box 531903	
Largo, FL 33777	St. Petersburg, FL 33747	
		al or another
Khris Colgate)	
	Name	
10831 Ca	nal Street	
Flo	orida street address (P.O. Box NOT acceptable)	30 On
Largo,	_{FL} 33777	7:- 0:#
		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
Manager	Khris Colgate 2030 East Vina Del Mar Bivd. St. Pete Beach, FL 33706	
(Use attachment if necessary)		2011 F.C.B
CLE V: Effective date, if other than the da effective date is listed, the date must be so days after the date of filing.)	pecific and cannot be more than five business o	NAL)
REQUIRED SIGNATURE:	Ω	6 ~

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Khris Colgate

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)